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CONFIRMATION NO. 4086

SERIAL NUMBER 10/623,371	FILING OR 371(c) DATE 07/18/2003 RULE	CLASS 536	GROUP ART UNIT 1645	ATTORNEY DOCKET NO. 377882002021	
<b>APPLICANTS</b> Karen L. Fearon, Lafayette, CA; Dino Dina, Oakland, CA; Stephen F. Tuck, Oakland, CA; <i>mm</i>					
<b>** CONTINUING DATA *****</b> This application is a CIP of 10/328,578 12/23/2002 which is a CIP of 10/176,883 06/21/2002 and is a CIP of 10/177,826 06/21/2002 and said 10/176,883 06/21/2002 claims benefit of 60/299,883 06/21/2001 and claims benefit of 60/375,253 04/23/2002 and said 10/177,826 06/21/2002 claims benefit of 60/375,253 04/23/2002 and claims benefit of 60/299,883 06/21/2001 <i>mm</i>					
<b>** FOREIGN APPLICATIONS *****</b> <i>None</i>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 10/17/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>mm</i> Verified and Acknowledged <i>mm</i> Examiner's Signature Initials		STATE OR COUNTRY CA	SHEETS DRAWING 21	TOTAL CLAIMS 15	INDEPENDENT CLAIMS 2
<b>ADDRESS</b> 25226					
<b>TITLE</b> Chimeric immunomodulatory compounds and methods of using the same-IV					
<b>FILING FEE RECEIVED</b> 440	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		